## **2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 837111** 

Entity Name: VARIAN MEDICAL SYSTEMS, INC.

**Current Principal Place of Business:** 

3100 HANSEN WAY PALO ALTO, CA 94304

**Current Mailing Address:** 

3100 HANSEN WAY

PALO ALTO. CA 94304 US

FEI Number: 94-2359345 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 22, 2018

**Secretary of State** 

CC3814415741

Officer/Director Detail:

Title VPC Title GCS

Name BISCHOPING, GARY W Name KUO, JOHN W
Address 3100 HANSEN WAY Address 3100 HANSEN WAY

City-State-Zip: PALO ALTO CA 94304 City-State-Zip: PALO ALTO CA 94304

Title AS Title D

NamePOLLARD, BRIANNameGUERTIN, TIMOTHY EAddress3100 HANSEN WAYAddress3100 HANSEN WAYCity-State-Zip:PALO ALTO CA 94304City-State-Zip:PALO ALTO CA 94304

Title D Title CEO

Name ILLINGWORTH, DAVID J Name WILSON, DOW R

Address 3100 HANSEN WAY Address 3100 HANSEN WAY

City-State-Zip: PALO ALTO CA 94304 City-State-Zip: PALO ALTO CA 94304

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN POLLARD ASSISTANT SECRETARY 03/22/2018